follow-up steps taken by his Ministry to cure the multi-faceted diseases discovered at the time of surprise check by them in the casualty section of the Safdarjung Hospital recently?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): Corrective steps taken by the Medical Superintendent, Safdarjung Hospital include:—

(a) Barbed wire in front of Casualty is being replaced with an Iron Grill;

(b) Trolleys have now been kept free for the use of patients;

(c) Condemnation of unserviceable items/ vehicles is in process;

(d) Construction of covered shed for parking Hospital Vehicles is in process;

(e) CPWD has been asked to clear all rubble, maintain all toilets, keep drainage lines clean, prevent collection of water from their plants, clear sewer blockages, remove all drooping telephone/electrical wires and fix them properly, and proper maintainance of all taps/coolers/lights;

(f) NDMC has been asked to clear non-hazardous Hospital Waste daily; and

(g) NDMC has been requested to restore full water supply.

Poor health services in Rural Areas of the North-Eastern States

330. DR. B.B. DUTTA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the poor health services in rural areas of the North Eastern States;

(b) if so, the specific programmes drawn up by Government to provide adequate health services in the rural areas especially in the tribal areas of the North Eastern States; and

(c) the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) Yes, Sir. Government is aware of some gaps in Rural Health infrastructure and manpower deployment in the North-Eastern States.

(b) and (c) Through the recently launched RCH Programme, specific programmes are being initiated in most of the North-Eastern States for (i) augmenting primary health infrastructure (ii) improving and expanding facilities for training local youths as ANMs/ Nurses; (iii) providing for contractual appointment of Medical and Para-Medical Staff for filling up vacancies (iv) involving NGOs in providing Medical Care to the people through trained health functionaries recruited from the local youth.

Various externally aided projects and Area Projects have been sanctioned for the North-Eastern States including Assam for bridging the infrastructural gaps in the Health Care System and improving the delivery of Rural Health Services through trained additional manpower.

Kidney racket in Country

331. SHRIMATI KAMLA SINHA:
SHRI S.M. KRISHNA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether his Ministry has the records of approximate number of patients requiring kidney transplantation in the country; if so, the details including availability thereof;

(b) whether his Ministry are aware of the kidney racket busted in different parts of the country particularly in NOIDA, Delhi, Ranchi etc., if so, the reaction thereof;

(c) whether the Human Organ Transplantation Act is not applicable in certain States of the country; if so, the reasons therefor; and

(d) the stringent steps being taken by All States within the ambit of the Act and the amendments proposed within the Act?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) No such Records are maintained by the Govt. However, as per information received from the AIIMS, 99 patients are on their waiting list and about 30-40 thousand patients of chronic kidney failure need transplantation every year in India.

(b) to (d) Yes, Sir. The Transplantation of Human Organ Act was passed by the Parliament

in June 1994 and given assent by the President of India on 8th July 1994. The Act provides for the regulation of removal, storage and transplantation of Human Organs for therapeutic purposes and for the prevention of commercial dealings in Human Organs and for matters connected therewith or incidental thereto. Some of the State including Uttar Pradesh & Bihar have not adopted the Act so far, inspite of repeated reminders at the highest level. The provides for stringent punishment for removal of Organs without authority, which is punishable with imprisonment for a term which may extend to five years, with fine which may extend to ten thousand rupees. If the registered Medical Practitioner is convicted, his name can be removed from the Register of the State Medical Council for a period of two years for the first offence, and permanently for a subsequent offence. The State Government who have adopted the Act can take action against the guilty persons, according to the provisions of the Act.

AIDS/HIV Counselling and Guidance Centre, Nagpur

332. SHRIMATI BASANTI SARMA:
DR. SHRIKANT RAMCHANDRA JICHKAR:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that the AIDS/HIV Counselling and Guidance Centre, Nagpur run by the Central India Foundation is the only full time voluntary centre available in the ten districts of the Vidarbha region of Maharashtra;

(b) if so, what is the help and assistance which the Government is giving to this Centre; and

(c) what steps will be taken to strengthen the work of this Centre and to give any special financial grants by Centre for its voluntary work in the field of AIDS?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) The State Government has reported that this is the only centre run by any Non-Governmental Organisation, and covers 9 Districts of Vidarbha Region.

(b) and (c) Government of Maharashtra has received a proposal from the organisation requesting for financial assistance. The proposal is to be considered by the Standing Core Committee for HIV/AIDS Control in the State of Maharashtra at its next meeting.

No expenditure on AIDS victims

333. SHRI JALALUDIN ANSARI:
SHRI GAYA SINGH:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to the news-item appearing in the Indian Express, New Delhi dated 5th May, 1998 under the caption "Crores are spent on AIDS awareness, not a penny on victims"; and

(b) if so, the details thereof and Government's reaction thereto?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) Yes, Sir.

(b) A Strategic Plan which offers "Care and Support of the Patients living with AIDS(PLWA)" has been initiated. The following measures have been taken to implement the plan:

(1) Instructions have been issued to all the Superintendents of the Central and State Medical College Hospitals to treat all AIDS cases without discrimination, without stigmatisation and patient should be treated in the General wards of the Hospitals. No case of AIDS is to be refused admission.

(2) For Treatment of the victims of the AIDS cases, NAC has already allocated funds for Treatment of opportunistic infections from which AIDS Patients usually suffer. These include anti-tuberculosis medicine, anti-protozoal medicine and anti-fungal medicines. The AIDS patients are to be given free treatment.

(3) A pilot study is being undertaken in Manipur, Maharashtra and Tamil Nadu for the care of the AIDS Patients right from the home level upto the tertiary level. Separate funds have been sanctioned for the AIDS care continuum project.